



SPAN Grant Solicitation | "Train-the-Trainer" Bike Workshops for Educators

Thanks for your interest in our Train-the-Trainer bicycle education workshops!

CRCOG has been engaged by the CT Department of Public Health (DPH) to lead the Active Transportation component of DPH's State Physical Activity and Nutrition (SPAN) grant.

The SPAN grant is a statewide effort and in order to successfully complete trainings and projects across the state, CRCOG and their team of consultants are working with the eight other regional councils of government and representatives from across the state to select recipients to receive "Train-the-Trainer" bicycle education workshops for Connecticut educators.

CRCOG has partnered with Bike Walk Connecticut (BWCT) to offer "Train the Trainer" (TTT) workshops to school educators to teach safe bicycling in health and physical education classes. This opportunity is a one-day workshop presented by BWCT and will provide Connecticut educators with the resources, tools, and skills they need to implement and teach a comprehensive bicycling education program in the elementary schools, specifically geared to train educators how to teach safe bicycling to 4th grade students. This workshop is the result of nine years of curriculum refinement in a Connecticut 4th grade bicycle education program.

What Will The Workshop Include?

- * In-depth exposure to a comprehensive, proven bicycle education curriculum.
- * Discuss concerns and learn strategies for establishing the program in schools.
- * Learn the habits of giving respect to and getting respect from all other road users.
- * Learn safe, defensive, confident cycling skills.
- * Get on a bike and practice cycling skills and drills in a traffic-free and supportive environment.
- * Each participant receives information with links and other resources.

A total of 10 workshop sessions will be awarded. Sessions can be conducted with individual schools and/or coordinated sessions can be conducted with multiple interested schools in a region or school district can be combined. Workshops are limited to ten educators.

ELIGIBILITY: Municipalities, councils of government, schools and boards of education are eligible to submit for a TTT workshop.

SELECTION & REVIEW CRITERIA: Projects will be selected by an Active Transportation Committee that has been specifically assembled for this grant. The ATC consists of members from across the state.

In general, selection of projects will consider the following criteria:

- Geographic diversity of selected locations throughout the state/regions and communities of varying sizes
- Health equities and health disparities or the population anticipated to benefit from the project
- Benefits towards sensitive populations (i.e. economically disadvantaged, racial and ethnic minorities,)
- Additional benefits to the community / community need (i.e. high crash rates, access to cars/transit-dependent populations)

FUNDING: These workshops are valued at \$1,500 and all workshop materials will be provided for attendees. Please note, due to funding requirements of the grant, recipients are expected to commit to completing the workshop within 1 year of award.

DUE DATE: Applications for all entries are due November 20, 2020.

Thank you for your interest and good luck!

For more information about Active Transportation efforts related to the CT SPAN grant, visit www.crcog.org/cdcproject.

Please complete the following sections. You may attach additional pages as necessary.

Name: _____ Email/Phone: _____

Town: _____ COG: _____

School / Address: _____

School District: _____

Number of Anticipated Attendees _____ Average Graduating Class Size _____

Describe how your school / student population would benefit from educators receiving the workshop and any plans for how training received can be integrated into school curriculum. Please be sure to speak to the grant evaluation criteria where applicable.

Describe your anticipated approval process / ability to complete the workshop within one year of award.

Please feel free to include any other additional information you feel would be helpful in considering your application.

Name: _____

Date: _____

Signature: _____